

UNITED STATES
SECURITIES AND EXCHANGE COMMISSION
Washington, D.C. 20549

## FORM D

NOTICE OF SALE OF SECURITIES
PURSUANT TO REGULATION D,
SECTION 4(6), AND/OR
UNIFORM LIMITED OFFERING EXEMPTION

134	832								
OMB APPROVAL									
OMB Number:	3235-0076								
Expires:	May 31,2005								
Estimated ave	rage burden								
hours per resp	onse16.00								
SECU	JSE ONLY								
Prefix	Serial								
DATE	RECEIVED								
1	}								

Name of Offering ( check if this is an amendment and name has changed, and indicate change.)  Series C Convertible Preferred Stock Financing of LDR Holding Corporation								
Filing Under (Check box(es) that apply):	□ Rule 504 □ Rule 505 ☑ Rule 506 □ Section 4(6) □ ULOE							
Type of Filing:	☐ Amendment							
	A. BASIC IDENTIFICATION DATA							
1. Enter the information requested about the	he issuer							
Name of Issuer ( check if this is an amend	ment and name has changed, and indicate change.)							
LDR Holding Corporation								
Address of Executive Offices	(Number and Street, City State, Zip Code) Telephone Number (Including Area Code)							
4030 W. Braker Lane, Suite 360, Aus	tin, Texas 78759 (512) 344-3300							
Address of Principal Business Operations	(Number and Street, City State, Zip Code) Selephone Number (Including Area Code)							
(if different from Executive Offices)								
Brief Description of Business	UCT U 3 2007							
Holding Company for medical device	companies. THOMSON:							
Type of Business Organization	TWANCIAL IIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIII							
☑ corporation [	☐ limited partnership, already formed ☐ other 07079058							
□ business trust	☐ limited partnership, to be formed							
	Month Year							
Actual or Estimated Date of Incorporation or	r Organization: 1 2 0 5   Actual   Estimated							
Jurisdiction of Incorporation or Organization	(Enter two-letter U.S. Postal Service abbreviation for State: CN for Canada; FN for other foreign jurisdiction)							

## GENERAL INSTRUCTIONS

Federal: Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

When to File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

State: This Notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

**ATTENTION** 

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB control number.

2. Enter the i	nformation req Each promoter	uested of the of the issuer,	following: if the issuer has been organi	zed within the past five ye	ars;		
	Each beneficial		g the power to vote or dispo	se, or direct the vote or dis	position of, 10% o	or more	e of a class of equity
•	-		irector of corporate issuers a	and of corporate general an	d managing partn	ers of p	partnership issuers;
		nd managing <sub>!</sub>	partner of partnership issuers	s.			
Check Box(es) that	Apply: C	] Promoter	■ Beneficial Owner	Executive Officer	<b>■</b> Director		General and/or
							Managing Partner
Full Name (Last nar	ne first, if indiv	vidual)					
Lavigne, Chri			0' 0' 7' 0 1)				
			eet, City, State, Zip Code)				
			tin, Texas 78759	<b>G</b> 2 - 0 - 0 - 0	■ Director		General and/or
Check Box(es) that	Apply: L	3 Promoter	Li Beneticiai Owner	Executive Officer	E Director		Managing Partner
Full Name (Last nar	me first, if indiv	vidual)					
Whitlock, Stev							
		umber and Str	eet, City, State, Zip Code)	<del></del>			
4030 W. Bra	ker Lane, Su	ite 360, Aus	tin, Texas 78759				
Check Box(es) that	Apply: C	] Promoter	☐ Beneficial Owner	☐ Executive Officer	☑ Director		General and/or Managing Partner
Full Name (Last nar	me first, if indiv	/idual)	<del> </del>				
Aragona, Jose	ph C.						
Business or Residen	ice Address (Ni	umber and Str	eet, City, State, Zip Code)				
4030 W. Bra	ker Lane, Su	ite 360, Aus	tin, Texas 78759				
Check Box(es) that	· · · · · · · · · · · · · · · · · · ·	Promoter	☐Beneficial Owner	☐ Executive Officer	☑ Director		General and/or Managing Partner
Full Name (Last na	me first, if indiv	vidual)					
Lalande, Kevi							
			eet, City, State, Zip Code)				
			tin, Texas 78759				
Check Box(es) that		Promoter	☐ Beneficial Owner	☐ Executive Officer	☑ Director		General and/or Managing Partner
Full Name (Last nar	me first, if indiv	/idual)					
Remy, Pierre					<u> "</u>		
Business or Resider	nce Address (Ni	ımber and Str	eet, City, State, Zip Code)				
4030 W. Bra			tin, Texas 78759				
Check Box(es) that	· -FE-7 ·	Promoter	☐Beneficial Owner	☐ Executive Officer	☑ Director		General and/or Managing Partner
Full Name (Last na	me first, if indiv	/idual)					
Medus, Jean-		·			· · · · · · · · · · · · · · · · · · ·		
			eet, City, State, Zip Code)	į			
			tin, Texas 78759				
Check Box(es) that		Promoter	☐ Beneficial Owner	☐ Executive Officer	☑ Director		General and/or Managing Partner
Full Name (Last na	me first, if indiv	ridual)					
Widensohler,				<del></del>			
			eet, City, State, Zip Code)				
4000 SS/ D	Lean Lana Cir	ita 260 Auc	tin Taxas 79750				

A. BASIC IDENTIFICATION DATA

Check Box(es) that Apply:	☐ Promoter	■ Beneficial Owner  ■ Compare the second of the second o	☐ Executive Officer	☐ Director		General and/or Managing Partner						
Full Name (Last name first, if it	Full Name (Last name first, if individual)											
Austin Ventures VIII, L.P.												
Business or Residence Address (Number and Street, City, State, Zip Code)												
300 W. 6th Street, Suite 2200, Austin, Texas 78701												
Check Box(es) that Apply:	□ Promoter	EBeneficial Owner	☐ Executive Officer	☐ Director		General and/or Managing Partner						
Full Name (Last name first, if it	ndividual)		:									
FCPR R Capital Technologies												
Business or Residence Address (Number and Street, City, State, Zip Code)												
42 rue d' Anjou, 75008	3, Paris, France	<u> </u>				··-						
Check Box(es) that Apply:	☐ Promoter	■ Beneficial Owner	☐ Executive Officer	☐ Director		General and/or Managing Partner						
Full Name (Last name first, if i	ndividual)											
Path <sup>4</sup> , LLC			<u> </u>									
Business or Residence Address	(Number and Str	eet, City, State, Zip Code)										
4030 W. Braker Lane,	Suite 360, Aus	tin, Texas 78 <mark>759</mark>		<u></u>								
Check Box(es) that Apply:	☐ Promoter	■Beneficial Owner	☐ Executive Officer	☐ Director		General and/or Managing Partner						
Full Name (Last name first, if i	ndividual)											
Telegraph Hill Partners			1									
Business or Residence Address	(Number and Str	eet, City, State, Zip Code)										
360 Post Street, Suite	601, San Franc	isco, CA 94108	<u></u>									
Check Box(es) that Apply:	☐ Promoter	☑ Beneficial Owner	☐ Executive Officer	☐ Director	<u> </u>	General and/or Managing Partner						
Full Name (Last name first, if i	ndividual)											
Path <sup>4</sup> Innovations, LP												
Business or Residence Address	(Number and Str	eet, City, State, Zip Code)										
4030 W. Braker Lane,	Suite 360, Aus	tin, Texas 78759										
Check Box(es) that Apply:	☐ Promoter	☑Beneficial Owner	☐ Executive Officer	☐ Director		General and/or Managing Partner						
Full Name (Last name first, if i	ndividual)											
Telegraph Hill SBIC, LP			<u></u> .									
Business or Residence Address	(Number and Str	eet, City, State, Zip Code)	•									
360 Post Street, Suite	601, San Franc	isco, CA 94108										
Check Box(es) that Apply:	☐ Promoter	☑ Beneficial Owner	☐ Executive Officer	☐ Director		General and/or Managing Partner						
Full Name (Last name first, if i	ndividual)											
Pinto Technology Ventu				<del></del> .								
Business or Residence Address	(Number and Str	eet, City, State, Zip Code)										
1000 Main, Suite 3250	, Houston, TX											
Check Box(es) that Apply:	☐ Promoter	☑Beneficial Owner	☐ Executive Officer	☐ Director		General and/or Managing Partner						
Full Name (Last name first, if i	ndividual)											
Verwaltungsgesellschaft												
Business or Residence Address		eet, City, State, Zip Code)				•						
Wandsbeker Königstr. 2	7-29, 22041 Ham	iburg										

				<u> </u>	B.	INFORM	ATION AI	BOUT OF	FERING				
1.	Has t	he issuer s	old, or do	es the issue	r intend to	sell, to no	on-accredite	d investors	in this off	ering?	Yes		lo 🗷
	Answer also in Appendix, Column 2, if filing under ULOE.												
2.	What is the minimum investment that will be accepted from any individual?									\$	N/A		
3.	Does	the offerin	ng permit j	joint owner	ship of a s	single unit	?	•••••			Yes	₩ N	lo 🛘
	A TO A CONTRACT OF THE STATE OF												
		(Last nar	ne first, if	individual)	•								
	N/A	or Residen	ce Addres	s (Number	and Stree	t. City. Sta	te. Zip Cod	le)		<u> </u>		<del>_</del>	
Dusi				(			,						
Nam	ie of A	Associated	Broker or	r Dealer									
	-			Has Solici								D Al	Il States
		AK 🗆	AZ 🗆	AR 🗆	CA 🗆	со 🗆	ст 🗆	DE 🗖	DC 🗆	FL 🗆	GA □	н 🗆	ID 🗆
IL		IN 🗆	IA 🗆	кѕ □	кү 🗆	LA 🗆	ме □	MD □	ма 🛚	мі 🗆	ми 🗆	MS □	мо 🗆
MT		NE 🗆	NV 🗆	NH 🗆	NJ 🗆	NM 🗆	NY 🗀	NC 🗆	ND 🗆	он 🛚	ок 🗆	OR 🗆	PA 🗆
		sc 🗆	SD □	TN 🗆	тх 🗆	UT 🗆	VT □	VA 🗆	WA 🗆	wv 🗆	WI 🗆	WY 🗆	PR 🖸
Full	Name	(Last nan	ne first, if	individual)									
Busi	ness o	or Residen	ce Addres	s (Number	and Street	t, City, Sta	te, Zip Cod	le)					
Nam	ne of A	Associated	Broker or	Dealer									
				Has Solicit			icit Purchas	ers			-		
	(Chec □	k "All Sta⊤ AK 🗖	tes" or che	eck individu AR 🏻	Ial states)	co 🗆	ст 🗆	DE 🗖	DC 🗆	FL 🖸	GA 🗆	LIA. □ HI	ll States ID □
		IN $\square$	IA 🗆	KS □	KY 🗆	LA 🗆	ME 🗆	MD 🗆	MA 🗆	MI 🗆	MN 🗆	MS 🗖	мо 🗆
мт		NE 🗆	NV 🗆	NH 🖸	NJ 🗖	NM 🗆	NY 🗆	NC 🗆	ND 🗆	он 🗆	ок 🗆	OR 🗆	PA 🗆
		sc □	SD 🗆	TN 🗆	тх 🗆	UT 🗆	VT 🗖	VA 🗆	WA 🗆	wv 🗅	wı 🗖	wy 🗆	PR 🛘
Full	Name	(Last nan	ne first, if	individual)									
Busi	ness c	or Residen	ce Address	s (Number	and Street	, City, Sta	te, Zip Cod	e)		<del></del>		<del></del>	
Nam	e of A	Associated	Broker or	Dealer					•	<del> </del>	<del></del>		
	_			Has Solicit								🗆 А	ll States
		AK 🗆	AZ 🗆	AR □	CA 🗆	со 🗆	ст 🛘	DE 🗆	DC 🗆	FL 🗆	GA □	н□	ıo 🗆
IL		IN 🗆	IA 🗆	ks □	KY □	ᅜ□	ме 🛘	MD □	ма 🗆	мі 🗖	MN 🗆	MS □	мо 🗆
мт		NE 🗆	NV 🗆	ин 🗆	NJ 🗆	NM 🗆	NY 🗆	NC 🗆	ND 🗆	он 🗖	ок 🗆	OR 🗆	PA 🗆
DI	П	sc 🗖	en 🗆	TN []	ту П	ит П	∨т П	VA '□	\/A □	wv 🗇	wi 🗀	wy 🖪	₽₽ □

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

_	C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES A	ND	USE OF PROC	EEL	S
1.	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box $\square$ and indicate in the columns below the amounts of the securities for exchange and already exchanged.				
	Type of Security	•	Aggregate Offering Price	A	mount Already Sold
	Debt	\$	0	\$	0
	Equity	S	24,999,999.50	s	24,999,999.50
	□ Common ☑ Preferred	•		•	
		\$	0	\$	0
	Convertible Securities (including warrants)			\$	
	Partnership Interests		0	\$	
	Other (Specify)	\$ \$	24,999,999.50	\$	24,999,999.50
	Answer also in Appendix, Column 3, if filing under ULOE.	Ð	24,333,333.30	Þ	24,999,999.30
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if the answer is "none" or "zero."				
			Number Investors	I	Aggregate Dollar Amount of Purchases
	Accredited Investors		9*	\$	24,999,999.50
	Non-accredited Investors	_	0	\$	0
	Total (for filings under Rule 504 only)				
	Answer also in Appendix, Column 4, if filing under ULOE.	*3	of the investors	ire f	oreign investors.
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C – Question 1.		Type of		Dollar Amount
	Type of Offering		Type of Security	•	Sold
	Rule 505	_		\$	
	Regulation A		<del></del>	\$	
	Rule 504			\$	
	Total	_	·	\$	
4.	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.				
	Transfer Agent's Fees	•••••		\$	
	Printing and Engraving Costs			\$	
	Legal Fees		X	\$	50,000.00
	Accounting Fees		🗖	\$	
	Engineering Fees	•••••		\$	
	Sales Commissions (specify finders' fees separately)			\$	
	Other Expenses (identify)			\$	
	Total	•••••	<b>E</b>	\$	50,000.00

C. OFFERING PRICE, NUM	BER OF INVESTORS, E	XPEN	SES A	AND USE OF PR	OCE	EDS	
b. Enter the difference between the aggre Part C - Question 1 and total expenses furr 4.à. This difference is the "adjusted gross pr	nished in response to Part (	C – Qı	uestio	n		\$	24,949,999.50
Indicate below the amount of the adjusted proposed to be used for each of the purpose is not known, furnish an estimate and check total of the payments listed must equal the forth in response to Part C – Question 4.b ab	s shown. If the amount for the box to the left of the e adjusted gross proceeds to	any p stimat	urpos e. Th	e e			
Total in response to Fare & Question its as	5. <b>5</b> .			Payments to Officers, Directors & Affiliates			Payments to Others
Salaries and fees		. 🗆	\$	<del></del>		\$	
Purchase of real estate	•••••	. 🗆	\$			\$	
Purchase, rental or leasing and installment of	machinery and equipment.	. 🗆	\$			\$	
Construction or leasing of plant buildings an	d facilities	. 🗖	\$			\$	
Acquisition of other businesses (including involved in this offering that may be used in securities of another issuer pursuant to a mer	exchange for the assets or	. 🗆	\$			\$	
Repayment of indebtedness		. 🗆	\$			\$	<del></del>
Working capital		. 🗆	\$		×	\$	24,949,999.50
Other (specify):			\$			\$	
			\$		. 0	\$	
Column Totals			\$		Œ	\$	24,949,999.50
Total Payments Listed (column totals added)				<b>x</b> \$	24,9	49,99	99.50
	D. FEDERAL SIGN	ATU	RE	· · · · · · · · · · · · · · · · · · ·			
he issuer has duly caused this notice to be signed to following signature constitutes an undertaking ritten request of its staff, the information furnule 502.	ng by the issuer to furnish	to the	U.S.	Securities and E	xchang	ge Co	ommission, upon
suer (Print or Type)	Signature		1	Da	ite		
LDR Holding Corporation				Se	ptemb	er 26	5, 2007
ame of Signer (Print or Type)	Title of Signer (Print or	Гуре)					
Steven I. Whitlock	Secretary						· <u></u> -
				$\mathcal{F}$ 9	11	)	

**ATTENTION** 

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)